

# El Dorado County

## Summary of Stop Loss Renewal Options

Carrier: Symetra

Effective August 1, 2009



Current Year 08/01/08 - 07/31/09				
Assumed EE's	Specific Deductible	Lasered Individuals	Premium PEPM	Est Annual Premium
1200	\$175,000	n/a	\$83.83	\$1,207,152

Renewal Year 08/01/09 - 07/31/10					
Renewal Option	Specific Deductible	Lasered Individuals	Premium PEPM	Est Annual Premium	% increase in premium cost
1 Renewal Option I	\$175,000	n/a	\$98.48	\$1,418,112	17.48%
2 Renewal Option II	\$200,000	n/a	\$82.63	\$1,189,872	-1.4%

**Notes:**

- 1] Stop Loss coverage includes terminal liability coverage. (implemented August 1, 2004)
- 2] Renewal does not include any lasered individuals.

Claimants over specific deductible 6/1/08 - 5/31/09	Current Annualized	Current adjusted to 2010 Plan year	Renewal Option 1 \$175,000 spec	Renewal Option 2 \$200,000 spec
Claimant #1	\$470,089	\$572,743	\$572,743	\$572,743
Claimant #2	\$271,751	\$331,093	\$331,093	\$331,093
Claimant #3	\$214,981	\$261,927	\$261,927	\$261,927
Claimant #4	\$207,269	\$252,530	\$252,530	\$252,530
Claimant #5	\$185,560	\$226,081	\$226,081	\$226,081
Claimant #6	\$162,526	\$198,017	\$198,017	would not exceed
Claimant #7	\$150,660	\$183,560	\$183,560	would not exceed
Claimant #8	\$143,700	\$175,080	\$175,080	would not exceed
Claimant #9	\$136,465	\$166,265	would not exceed	would not exceed

	Current Annualized	Renewal Option 1	Renewal Option 2
<b>[a] Specific Deductible</b>	<b>\$175,000</b>	<b>\$175,000</b>	<b>\$200,000</b>
[b] # of Claimants exceeding Specific Deductible	5	8	5
[c] Cumulative Total Large Claims	\$1,349,650	\$2,201,031	\$1,644,374
[d] Cumulative Satisfied Specific Deductibles	\$875,000	\$1,400,000	\$1,000,000
[e] Excess Claims Above Specific Deductible	\$474,650	\$801,031	\$644,374
[f] Lasered Individual	\$0	\$0	\$0
<b>[g] Estimated Stop Loss Reimbursement Due = (e) minus (f) or \$0 if sum is negative</b>	<b>\$474,650</b>	<b>\$801,031</b>	<b>\$644,374</b>
<b>PROJECTED ANNUAL PREMIUM COST</b>	<b>\$1,207,152</b>	<b>\$1,418,112</b>	<b>\$1,189,872</b>
Projected Annual \$ Increase Compared to Current Variance to Current		\$210,960 17.5%	(\$17,280) -1.4%
[+] increase for claimants exceeding the specific deductible	\$0	\$0	\$125,000
[+] increase for claimants <i>not</i> exceeding the specific deductible	\$0	\$0	\$31,656
[+] Additional laser	\$0	\$0	\$0
<b>[=] Projected Annual INCREASE in COUNTY CLAIM LIABILITY:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$156,656</b>
<b>[=] PROJECTED TOTAL ANNUAL PREMIUM &amp; CLAIM LIABILITY</b>	<b>\$1,207,152</b>	<b>\$1,418,112</b>	<b>\$1,346,528</b>
Projected Annual \$ Increase Compared to Current Variance to Current		\$210,960 17.5%	\$139,376 11.5%
Projected Annual Savings as Compared to Renewal Option 1 Variance to Renewal Option 1			(\$71,584) -5.0%

Projected Claimants over specific deductible 8/1/09 - 07/31/10	Current Annualized	Renewal Option 1	Renewal Option 2
Claimant #1	\$470,089	\$572,743	\$572,743
Claimant #2	\$271,751	\$331,093	\$331,093
Claimant #3	\$214,981	\$261,927	\$261,927
Claimant #4	\$207,269	\$252,530	\$252,530
Claimant #5	\$185,560	\$226,081	\$226,081
Claimant #6	\$162,526	\$198,017	\$198,017
Claimant #7	\$150,660	\$183,560	\$183,560
Claimant #8	\$143,700	\$175,080	\$175,080
Claimant #9	\$136,465	\$166,265	would not exceed

**Illustrative Analysis of Renewal Options based on Projected Year Large Claimants**

**Individual Claims Exceeding the Specific Deductible**

**Claimant #1 - Projected Claim for Fiscal Year 09/10**

	Current Annualized	Renewal Option 1	Renewal Option 2
\	\$470,089	\$572,743	\$572,743
	<u>(\$175,000)</u>	<u>(\$175,000)</u>	<u>(\$200,000)</u>
Amount exceeding specific deductible	\$295,089	\$397,743	\$372,743

**Claimant #2 - Projected Claim for Fiscal Year 09/10**

Specific Deductible	\$271,751	\$331,093	\$331,093
	<u>(\$175,000)</u>	<u>(\$175,000)</u>	<u>(\$200,000)</u>
Amount exceeding specific deductible	\$96,751	\$156,093	\$131,093

**Claimant #3 - Projected Claim for Fiscal Year 09/10**

Specific Deductible	\$214,981	\$261,927	\$261,927
	<u>(\$175,000)</u>	<u>(\$175,000)</u>	<u>(\$200,000)</u>
Amount exceeding specific deductible	\$39,981	\$86,927	\$61,927

**Claimant #4 - Projected Claim for Fiscal Year 09/10**

Specific Deductible	\$207,269	\$252,530	\$252,530
	<u>(\$175,000)</u>	<u>(\$175,000)</u>	<u>(\$200,000)</u>
Amount exceeding specific deductible	\$32,269	\$77,530	\$52,530

**Claimant #5 - Projected Claim for Fiscal Year 09/10**

Specific Deductible	\$185,560	\$226,081	\$226,081
	<u>(\$175,000)</u>	<u>(\$175,000)</u>	<u>(\$200,000)</u>
Amount exceeding specific deductible	\$10,560	\$51,081	\$26,081

**Claimant #6 - Projected Claim for Fiscal Year 09/10**

Specific Deductible	\$162,526	\$198,017	\$198,017
	<u>(\$175,000)</u>	<u>(\$175,000)</u>	<u>(\$200,000)</u>
Amount exceeding specific deductible	\$0	\$23,017	\$0

**Claimant #7 - Projected Claim for Fiscal Year 09/10**

Specific Deductible	\$150,660	\$183,560	\$183,560
	<u>(\$175,000)</u>	<u>(\$175,000)</u>	<u>(\$200,000)</u>
Amount exceeding specific deductible	\$0	\$8,560	\$0

**Claimant #8 - Projected Claim for Fiscal Year 09/10**

Specific Deductible	\$143,700	\$175,080	\$175,080
	<u>(\$175,000)</u>	<u>(\$175,000)</u>	<u>(\$200,000)</u>
Amount exceeding specific deductible	\$0	\$80	\$0

**Claimant #9 - Projected Claim for Fiscal Year 09/10**

Specific Deductible	\$136,465	\$166,265	\$166,265
	<u>(\$175,000)</u>	<u>(\$175,000)</u>	<u>(\$200,000)</u>
Amount exceeding specific deductible	\$0	\$0	\$0